<i>U. S.</i> CO	n No. 1034—Revise escribed by General, U. S. Approved 51, Supp. No. 11) bruary 20, 1952)	1					_		·	
(Department, bureau, or establishment) Voucher prepared at							-	PAID BY		
v oucher prep	ared at		(Give place and date)				-	<u>^</u>	4	
THE UNITED S	STATES, Dr.,	yee's Account No				Cael 8				
To								PD- 03	360-59	
			(Payee)				- L	COPY (/ OF 2	
	(Add	· /	(City)		(State)		_			
No. and Date of Order	Date of Delivery or Service	(Enter description, schedule, and	ARTICLES OR SERVICES (Enter description, item number of contract or Fe schedule, and other information deemed nec		supply	QUANTITY	UNIT PRICE		AMOUNT	
		Discount Terms	other information deem	ed necessary	') 	Qualities	Cost	Per	Dollars	
		Costs							\$2	
									·	
PAYMENT:										
Complete 🗌										
Partial 🔲										
Final			ontinuation sheet(s) if nece	sary						
Shipped from	to			lovernment		ee must NO	Tues this	Total	\$2	
I certify that the above bill is correct and just and that payment has not been received. (Payee must NOT to Differences										
		(Sign original only)					**********			
Date 1/7/5	50 45									
Daw		quired when a lik	e cortificate is made by payee on attack	od bill or bills)	Amou	int verified;	correct for		82	
Per										
Contract No.	-/0/	Date	Reg. No.			ate	Ir	voice Rec'd	l	
Pursuant to authori	ity vested in me, I	certify that this account	t is correct and proper for	payment.						
† Approved for \$				†	~~ 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		3.0			
Rv			SIGN Original							
<i></i>		***************	ONLY	little		*****				
Title				Date						
	THE REVERSE OF THIS	S FORM MUST BE EXECUTED Y	WHEN PURCHASES ARE MADE OF	SERVICES SEC	URED WITHO	OUT WRITTEN AG	REEMENT IN	ANY FORM		
	ACCOUN	TING CLASSIFICATION	N (Appropriation Symbo	must be sh	own; othe	er classification	on options	al)		
				·						
-										
			*1 *14.64							
		TO :0116					-			
		~~~~	BINAL							
Paid by { Check No	0	dated	, 19  , for	\$			on Treas	urer of the Ur	nited States in fa	
i ala oy i			19			·******				

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